

# Guidelines for Family Interaction Planning

## Background

When children are placed in out-of-home care, maintaining connections with their family is critical to reducing the trauma that results from being separated from their family. Family interaction is an opportunity to maintain, establish and promote parent-child and sibling relationships. Family interactions are defined as “the interpersonal dynamics of the members of a family in a variety of environments and activities.” In addition to maintaining relationships, it is also an opportunity for parents to evaluate their own parenting capacities and gain knowledge of new practices and views about parenting.

Family interactions include face-to-face contact, telephone calls, letters/cards, emails, “skyping”, and attendance at routine activities such as counseling sessions, medical appointments, school events, and faith related activities. Out-of-home care providers should be informed of the importance of all interactions and should understand that transitioning between the providers and interactions with their parents can be difficult for children. Contact should only be limited if the safety of the child is threatened by such contact. Family interactions should always take place in the least restrictive setting that allow for safety of the child.

**Face-to-face interaction must occur no later than 5 calendar days from the date of the temporary physical custody hearing.** Even prior to the 5-day face-to-face interaction, contact between parents and children should be encouraged through the use of telephone calls or other types of interactions.

## General Guidelines

The following guidelines, specific to face-to-face family interaction, are examples from evidence-based research and practice.

### *Determining Whether Contact Needs To Be Supervised*

Per Department of Children and Families (DCF) policy, Initial Assessment Social Workers (IASW)/Ongoing Case Managers (OCM) must assess if there are present or impending danger threats to child safety prior to implementing face-to-face family interaction. They must also assess for current or prior domestic violence in the relationships involved in the case/home. In the absence of a court order or documented concerns for child safety or the safety of other family members, the IASW/OCM must consider a plan for unsupervised family interaction.

In general, the IASW/OCM should rely on the *Safety Assessment and Analysis* to determine whether contact should be supervised, partially supervised, or unsupervised. Consideration should be given to impending danger threats and whether those threats can be controlled for the duration of interactions. That is, can resources or supports be put in place to control the impending danger threats while parents and children interact? The IASW/OCM should carefully consider how identified impending danger threats impact a parent’s ability to safely interact with their child for short periods of time. For example, if the *Safety Assessment and Analysis* indicates that the parent’s “living arrangements seriously endanger the physical health of the child” or “parents do not have resources to meet basic needs,” supervised face-to-face family interaction is not necessary. While it may not be feasible for interactions to occur in the most desirable natural setting (i.e., home), the family may be able to interact unsupervised in a relative, out-of-home care provider, or community location for the duration of the contact.

IASW/OCM should refer to DCF Memo Series 2006-08:

- Appendix A: *Safety Considerations to assist in determining whether face-to-face family interaction needs to be supervised.*
- Appendix C: *Considerations in Cases with Domestic Violence*

### ***Terminating a Family Interaction Session***

A family interaction may be immediately ended if at any time the person supervising the interaction determines the interaction is contrary to the safety of the child (i.e., parent is being disruptive in a way that is negatively impacting the safety of the child). In such instances, it is important to understand how the parent's behavior directly impacts child safety. For example, a parent showing up under the influence of a substance within itself does not mean a face-to-face interaction is immediately ended. There must be consideration for whether the parent's behavior reaches safety threshold criteria.

### ***Modifying Family Interaction***

If a parent fails to show up for a scheduled interaction, the parent should discuss with the IA/OCM the reasons for the no-show and provide an explanation to the child for the missed interaction. If the IASW/OCM has made reasonable efforts to assure the parent is able to attend face-to-face interactions (e.g., transportation) and the parent fails to show for more than one face-to-face interaction, the IASW/OCM should modify the family interaction plan by implementing a "call ahead" procedure for the parent for subsequent interactions. In these instances, the parents should call 24 hours prior to the face-to-face interaction to confirm that they will be there, and in some circumstances, the parent should arrive at the identified location before staff drives to pick up the children for the interaction. Missed face-to-face interactions by a parent are extremely hard on children and every effort should be made to reduce this further trauma for the child.

Additional considerations for modifying family interaction should be made in the following circumstances (including, but not limited to):

- Parent is repeatedly questioning the child about the case details or discussing case issues; this is especially important when there is a pending criminal court proceeding;
- Parent makes promises to the child about returning home; or
- Child, after thorough exploration with his/her therapist, continues to express a desire not to have face-to-face with the parent.

### **Initial Phase: (from TPC -- 45 days)**

The purpose of the initial phase of face-to-face family interaction when supervision is necessary is to observe and assess the parent's ability to provide the necessary care and guidance to the children who have recently been removed from their care. The initial phase of family interactions lasts approximately 4-6 weeks; however, based on individual family dynamics and case circumstances, it will vary.

At the end of this initial phase, and in conjunction with a comprehensive assessment, the family interaction worker should be prepared to make recommendations for the Family Interaction Plan. The age of the child and the placement location should be taken into consideration when determining the frequency and location of face-to-face family interactions.

In general, infants and toddlers should have frequent contact. A general guideline is face-to-face family interaction 2-3 times per week for 1-2 hours. If the child is placed a great distance from the parent, every consideration should be given to have the parent travel to visit the child, rather than transporting the child in the car for long distances. Spending long periods of time in the car is very hard on young children, and takes them away from activities crucial for their development, such as interaction and bonding with their caregivers, and age-appropriate stimulation.

Guidelines for children preschool and school-aged are 1-2 times/week for 2 hours each. Care should be taken to schedule face-to-face contact so as to not interfere with important extra-curricular and community activities for the child. Parents should be encouraged to attend these extra-curricular and community activities to promote interaction in natural settings.

Older children (12-18) may interact with parents based on mutual desire. Parents may attend community events with adolescents, assist with school work, and participate in activities that promote the interest of the child. Contacts in the most natural setting are preferred. Family interactions may be weekly or 2 times/week to meet the schedule of the child.

In order of preference, locations for interactions include, but are not limited to:

- parental home
- out-of-home care provider's home
- Relative or family friend's home (that the child is familiar with)
- community location
- facility, agency or case manager's office

### **Intervention Phase: (45 days – 5 months)**

When there is a need to continue to supervise family interaction due to threats to child safety, the purpose of the "Intervention Phase" is to use the information gathered from the Initial phase to engage parents in a process focused on solutions in order to begin to move to unsupervised interactions. These discussions focus parental protective capacities and the relation of safety threats. The length of this phase depends on the family's circumstances and will vary depending on the progress made by the parent, including their understanding and readiness for change.

The focus of the worker when providing supervised family interactions should be coaching, teaching, and modeling for the parent the skills desired in order to meet the child's needs. Documentation should focus on the parent's engagement with the change process and their willingness to take initiatives to meet their child's needs during interactions. This may include preparation for family interactions and follow-up by the parent from contact-to-contact.

#### ***Guidelines for frequency and duration of face-to-face family interaction***

**Children birth – 3 years old:** 1-2 hours 2 times/week. If the plan is moving quickly toward reunification (i.e. it is likely in the next two months) then the interactions should increase in both duration and frequency. For example, if a parent is doing well in 2-hour interactions, one of the interactions may become a 4 hour contact to see whether the parent can provide for the child's needs for an extended length of time. As this continues to go well, interactions can progress to unsupervised and overnight visits, moving quickly toward reunification.

**Preschool and School aged children:** 2 hours 2/week. As with younger children, as the parent makes progress indicating movement toward reunification, family interactions should become less restrictive (i.e., supervised, if appropriate; to decreasing levels of supervision; to unsupervised contact), increase in duration and frequency, and support parents in enhancing their protective capacities.

**Adolescents:** Family Interactions should be based on mutual desire and effort should be made to involve the parent in the child's interests and activities.

### ***Transitioning To Unsupervised Face-to-Face Family Interaction***

As parents show they are able to keep the child safe, family interactions should progress toward being less restrictive, increase in length, and support parents in enhancing their protective capacities. This is an important step on the path to reunification. When the case manager believes the family is progressing with supervised face-to-face family interaction, increasing the duration and frequency is an important step to determine if the parent can care for the child for longer periods of time. The Family Interaction plan may, for example, include a 4 or 5 hours contact. If these interactions have been successful for 3-4 weeks, then an unsupervised interaction could be appropriate. Overnight and weekend interactions are the final step toward reunification. Holding overnight and weekend interactions allow the case manager to confirm whether impending danger threats can sustainably be controlled or have been eliminated.

### **Transition Phase: (5 months – case closure)**

When reunification is no longer the permanence goal, consideration should be given to the impact of less frequent or discontinued contact between the child and family on the child's emotional well-being, needs for attachment, stability, and sense of security. For example, if the permanency goal is Transfer of Guardianship (TOG), chances are the birth parent will continue to have contact with the child through the relative assuming guardianship. In this case, a family interaction plan should be developed and implemented, supporting how the family will ensure interactions following case closure. This is done so that they can begin practicing while the case is open and the support of the Ongoing Case Manager is available to work out possible pitfalls. Weekly family interactions may be the norm based on the family's schedule and ability to facilitate interactions.

In the case where TPR/Adoption is the permanency goal and the adoptive parent has a working relationship with the birth parent and intends to allow the birth parent to have contact with the child post TPR, a family interaction plan that will work when the case is closed should be developed and implemented. For example, if the intention is to allow the child once a month contact following closure, this contact should be implemented prior to closure.

In the scenario of TPR/Adoption where the adoptive parent has no intention of allowing continued contact between birth parent and child following case closure, therapeutic interaction would be important following TPR (note: legal parties often will not allow a decrease or implementation of "therapeutic closure" interactions until the TPR has been granted). However, once the family is at the TPR stage, once a week or once every other week would be a reasonable interaction plan, using therapeutic interaction when TPR is granted.

Focus during these interactions should be on guiding the parent through the process of taking responsibility for the actions resulting in the child not being returned home. In addition, this provides an opportunity for parents to say goodbye to their children and give the child permission to attach to and love their new family. This is incredibly important for children being adopted.